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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. QMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/622,400 **TRANSMITTAL** Filing Date July 18, 2003 First Named Inventor **FORM** Lewis C. Keller, et al. Art Unit 1761 **Examiner Name** Drew E. Becker (to be used for all correspondence after initial filing) **Attorney Docket Number** CFLAY.00212 16 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC X Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC X Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final **Provisional Application** Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify **Terminal Disclaimer** Extension of Time Request below): Request for Refund 1.Return Receipt Postcard **Express Abandonment Request** 2.Check in the amount of \$250.00 CD, Number of CD(s) ___ Information Disclosure Statement Landscape Table on CD **Certified Copy of Priority** Remarks Document(s) Response to Office Action mailed October 31, 2005. Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name CARSTENS & CAHOON LLP Signature Printed name Jeffrey G. Degenfelder Reg. No. Date February 28, 2006 44,647 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on Express Mail No. EV 764375708 US the date shown below: Signature ann mlum February 28, 2006 Nancy Graham Date Typed or printed name

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Complete if Known Effective on 12/08/2004. Sursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/622,400 **Application Number FEE TRANSMITTAL** July 18, 2003 Filing Date For FY 2005 Lewis C. Keller, et al. First Named Inventor Drew E. Becker **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 1761 Art Unit

TOTAL AMOUNT OF PAYME	NT (\$)	250.00	Attorney Docke	et No. CF	LAY.00212	
METHOD OF PAYMENT (check all that apply)						
Check Credit Card Money Order None Other (please identify):						
Deposit Account Deposit Account Number: 50-0392 Deposit Account Name: Carstens & Cahoon, LLP						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
FEE CALCULATION						
Small Entity Small Entity					ATION FEES Small Entity	
	Fee (\$) Fee		•	Fee (\$)	Fee (\$)	Fees Paid (\$)
	300 15		250	200	100	\$0.00 \$0.00
8	200 10		50	130	65	\$0.00
	200 10		150	160	80	\$0.00
	300 15		250	600	300	\$0.00
	200 10	0 0	0	0	0	Small Entity
2. EXCESS CLAIM FEES Fee Description Fee (\$) Fee (\$)						
Each claim over 20 (including Reissues)					50	25
Each independent claim over 3 (including Reissues)					200 360	100 180
Multiple dependent claims <u>Total Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>						pendent Claims
- 20 or HP = x =\$0.00					Fee (\$)	Fee Paid (\$)
HP = highest number of total cla	-		Doid (\$)			<u> </u>
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = x = \$0.00						
HP = highest number of independent claims paid for, if greater than 3.						
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer						
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50						
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x = \$0.00						
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$) \$0.00						
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Telephone 972.367.2001 Registration No. 44,647 Signature (Attorney/Agent) Date February 28, 2006 Name (Print/Type)

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